



Complete and send this form, together with applicable fee(s), to: Mail,

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax

(703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for

maintenance fee notification	ns.						
	CE ADDRESS (Note: Use Block I for 590 01/21/2005	any change of address)	4C0	Note: A certificate of Fee(s) Transmittal. The papers. Each additions have its own certificate	mailing can only be used for is certificate cannot be used all paper, such as an assignment of mailing or transmission.	or domestic mailings of the for any other accompanying ent or formal drawing, must	
OLIFF & BERRI P.O. BOX 19928 ALEXANDRIA, V	1	O'	TEICE SOL	Cel I hereby certify that the States Postal Service of addressed to the Mai Astransported to the Mai	rtificate of Mailing or Trans nis Fee(s) Transmittal is bein with sufficient postage for fir I Stop ISSUE FEE address TO 50030746 4000 on the c	smission g deposited with the United st class mail in an envelope above, or being facsimile late indicated below.	
	`	₽ W	39 1	04 <del>3 23/5003 .380085.</del>	- 09000015 10EE/785	(Depositor's name)	
X Total		VEN.	MARY	01 FC:1501 02 FC:1504	1400.00 (JF 300.00 (JF (Signatur		
		& THAD		VA FC:1304	300.0	(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED	INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/684,486	10/684,486 10/15/2003		Hideo Kobayashi		111904.01	3501	
TITLE OF INVENTION: I	NTERNAL COMBUSTION	ENGINE WITH RI	EGENERATO	DR			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400		\$300	\$1700	04/21/2005	
EXAMINER		ART UNIT		CLASS-SUBCLASS	]	•	
KAMEN	3747		123-041140				
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).      Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.      "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	HE PATENT	(print or type)			
PLEASE NOTE: Unless recordation as set forth in	s an assignee is identified be n 37 CFR 3.11. Completion	elow, no assignee of this form is NOT	data will appe Γa substitute f	ear on the patent. If an assign filing an assignment.	nee is identified below, the o	document has been filed for	
(A) NAME OF ASSIGN	EE	(B)	) RESIDENC	E: (CITY and STATE OR CO	UNTRY)		
TOYOTA JIDO	OSHA KABUSHIKI	KAISHA	TO	OYOTA, JAPAN			
Please check the appropriate	e assignee category or catego	ries (will not be pri	inted on the pa	itent): 🗖 Individual 🖾 C	orporation or other private gr	oup entity Government	
4a. The following fee(s) are	enclosed:	4b	Payment of I		Chook No	1656/0	
				A check in the amount of the fee(s) is enclosed. Check No. 165649  Payment by credit card. Form PTO-2038 is attached.			
Advance Order - # o			The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 15:0461 (enclose an extra copy of this form).				
5. Change in Entity Status	(from status indicated above						
	MALL ENTITY status. See		,	ant is no longer claiming SMA			
NOTE: The Issue Fee and F	is requested to apply the Issue obligation Fee (if required) words of the United States Pater	vill not be accepted	l from anyone	y) or to re-apply any previous other than the applicant; a reg	ly paid issue fee to the applic istered attorney or agent; or t	ation identified above. he assignee or other party in	
Authorized Signature	pdeli	}		Date	April 14, 200	5	
Typed or printed name Jude L. Cooney				Registration	1 No. 54,045		
This collection of information	on is required by 37 CFR 1.3	11. The information	n is required t	o obtain or retain a benefit by	the public which is to file (an	d by the USPTO to process)	

an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.31. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

OMB 0651-0033

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.